

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION		<i>OK</i>	<i>4-15</i>
O.I.P.E. CLASSIFIER		<i>8</i>	<i>4-19-79</i>
FORMALITY REVIEW	<i>YC</i>	<i>7817</i>	<i>4-27-79</i> <i>6-30-79</i>

INDEX OF CLAIMS

✓ Rejected N Non-elected
 - Allowed I Interference
 (Through numeral)..... Canceled A Appeal
 + Restricted O Objected

Claim	Date
Final Original	
1	✓
2	✓
3	✓
4	✓
5	✓
6	✓
7	✓
8	✓
9	✓
10	✓
11	✓
12	✓
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41	✓
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47	✓
48	✓
49	✓
50	✓

Claim	Date
Final Original	
51	✓
52	✓
53	✓
54	✓
55	✓
56	✓
57	✓
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91	✓
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100	✓

Claim	Date
Final Original	
101	✓
102	✓
103	✓
104	✓
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144	✓
145	✓
146	✓
147	✓
148	✓
149	✓
150	✓

BEST AVAILABLE COPY If more than 150 claims or 10 actions
staple additional sheet here